

GP1647 \$

PTO/SB/17 (09-00)

Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE**FEE TRANSMITTAL
for FY 2001***Patent fees are subject to annual revision.**Complete if Known*Total amount of payment **(\$ 1,130.00)**

Application Number

JAN 16 2001

09/246,129

Filing Date

February 8, 1999

First Named Inventor

YU, et al.

Examiner Name

Draper, G.

Group Art Unit

1647

Attorney Docket Number

PF141P4

METHOD OF PAYMENT (CHECK ONE)**FEE CALCULATION (CONTINUED)**

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number **08-3425**Deposit Account **Human Genome Sciences, Inc.**
Name

- Charge Any Additional Fee Required
Under 37 CFR §§ 1.16 and 1.17

- Applicant claims small entity status

See 37 CFR 1.27

2. Payment Enclosed:

Check Credit Card Money Order Other

Charge any deficiencies or credit any overpayments in the fees or fee calculations of Parts 1, 2 and 3 below to **Deposit Account No. 08-3425**

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

Subtotal (1)**\$****2. EXTRA CLAIM FEES**

Total claims	53	- 61	0	Extra	Fee from below	Fee Paid
Indep.claims	4	- 7**	0	N/A	\$0.00	
Multiple Dependent	0	0	0			

Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim
108	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

Subtotal (2)**(\$ 0.00)**

Other fee (specify):.....

Other fee (specify):

*Reduced by Basic Filing Fee Paid

Subtotal (3)**\$ 1,130.00****Submitted By**Name (Print/Type) **Joseph J. Kenny**Signature: *Joseph J. Kenny*

Complete if applicable

Registration No.: **43,710**Telephone **301-610-5800**Date **1/16/01**

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: YU *et al.*

Application Serial No.: 09/246,129

Group Art Unit: 1647

Filed: February 8, 1999

Examiner: Draper, G.

For: TUMOR NECROSIS FACTOR-GAMMA

Atty. Docket No.: PF1414



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REQUEST FOR DRAFTSPERSON'S APPROVAL OF DRAWING CHANGE

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Applicants respectfully request that the correction to the attached Figures 4, 10, 14 and 15, in which corrections are indicated in red-ink, be entered into the above-identified application. Substitute Figures 4, 10, 14 and 15 are also attached hereto. Entry of substitute Figures 4, 10, 14 and 15 is hereby respectfully requested.

No fee is believed due in connection with this submission. However, should a fee be required, the Assistant Commissioner is hereby authorized to charge such fee to Deposit Account No. 08-3425. A duplicate of this sheet is enclosed.

Respectfully submitted,

Date: January 16, 2001


Joseph J. Kenny
(Reg. No. 43,710)
Agent for Applicants

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Enclosures
MMW/JJK/lcc